

*NKUMC Sunday School Registration Form
2009-2010*

Last Name _____ Parent's Names _____

Address: _____ Phone: _____ Email _____

_____ Cell Phone _____

Child: _____ Age _____ DOB _____ Grade in Sept. 2009 _____

Allergies _____

Special Needs _____

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Allergies _____

Special Needs _____

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Special Needs _____

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Allergies _____

Special Needs _____

I would be able to help as a:	Teacher Substitute (w/helper)	Yes	No
	Teacher Helper	Yes	No
	Kitchen Helper	Yes	No
	Special Event Helper	Yes	No

A \$ 5.00 donation is suggested per family to help provide snacks during Sunday School throughout the year.

Any questions please contact:
Trish Halloran 295-2406 or tjhallo@cox.net